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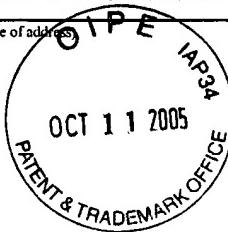
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00046 7590 07/15/2005

YOUNG & THOMPSON
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10/13/2005 MBEYEN2 00000017 10077746

01 FC:1501 1400.00 OP
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(Depositor's name)

(Signature)

(Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/077,746 | 02/20/2002 | Antonio Facchiano | 2507-1003 | 3449 |

TITLE OF INVENTION: PEPTIDE INHIBITING PLATELET DERIVED GROWTH FACTOR (PDGF-BB) AND FIBROBLAST GROWTH FACTOR (BFGF) ACTIVITY

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|--------------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 10/17/2005 |
| EXAMINER | ART UNIT | | CLASS-SUBCLASS | | |
| ROOKE, AGNES BEATA | 1653 | | 514-015000 | | |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1. YOUNG & THOMPSON

2. _____
3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

PROVINCIA ITALIANA DELLA CONGREGAZIONE Roma, Italy
DEI FIGLI DELL'IMMACOLATA CONCEZIONE -
INSTITUTO DERMOPATICO DELL'IMMACOLATA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 25-0120 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date October 11, 2005

Typed or printed name Benoit CASTEL

Registration No. #35,041

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